

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

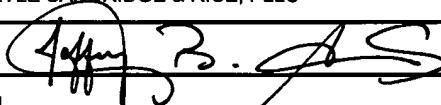
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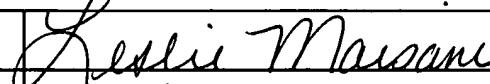
TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

Total Number of Pages in This Submission	6	Application Number	10/618,119
		Filing Date	July 11, 2003
		First Named Inventor	Kelly Hudson
		Art Unit	1712
		Examiner Name	Metzmaier, Daniel S.
		Attorney Docket Number	H147 1020.2 (30727.0031.6)

ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC	
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer		
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund		
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____		
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD		
<input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Name	WOMBLE CARLYLE SANDRIDGE & RICE, PLLC
Signature	
Printed name	Jeffery B. Arnold
Date	February 3, 2006
	Reg. No. 39,540

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature		
Typed or printed name	Leslie N. Maisano	Date February 3, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.
Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

Application Number	10/618,119
Filing Date	July 11, 2003
First Named Inventor	Kelly Hudson et al.
Examiner Name	Metzmaier, Daniel S.
Art Unit	1712
Attorney Docket No.	H147 1020.2 (30727.0031.6)

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify):

Deposit Account Deposit Account Number: 09-0528 Deposit Account Name: Womble Carlyle Sandridge & Rice

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Small Entity Fee (\$)</u>
31	- 20 or HP =	0	x 0 = 0	50 25

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
8	- 3 or HP =	0	x 0 = 0	0 0

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
N/A	- 100 =	N/A / 50 = N/A (round up to a whole number)	x 0 = 0	0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

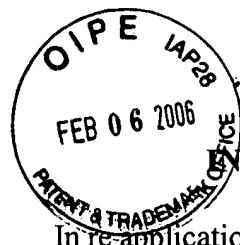
<u>Fees Paid (\$)</u>
0

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 39,540	Telephone (404) 879-2433
Name (Print/Type)	Jeffery B. Arnold		Date February 3, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re-application of:

Kelly Hudson et al.
Serial No: 10/618,119 Art Unit: 1712
Filed: July 11, 2003 Examiner: Metzmaier, Daniel S.
For: HIGHLY EFFICIENT METHOD OF) Conf. No.: 4101
MIXING DISSIMILAR FLUIDS USING)
MECHANICALLY INDUCED)
CAVITATION)

SECOND SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

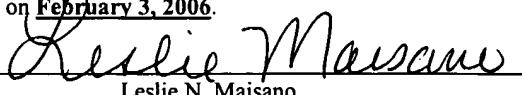
Sir:

The citation of information on the attached Form PTO/SB/08A, "Information Disclosure Statement By Applicant" is made pursuant to 37 C.F.R. §§ 1.97 and 1.98. Pursuant to 37 C.F.R. §1.98, a copy of each cited item is not enclosed.

The Examiner is specifically requested not to rely solely on the information submitted herein. On the contrary, the Examiner is requested to conduct an independent and thorough review of the information, and to form independent opinions as to their significance.

It is respectfully requested that the Examiner initial and return copies of the enclosed Form PTO/SB/08A and to indicate in the official file wrapper of the above-identified patent application that each item of the cited information has been considered.

I hereby certify that this correspondence is being deposited with the United States Postal Service in an envelope with sufficient postage addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on February 3, 2006.


Leslie N. Maisano

SECOND SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Application No. 10/618,119

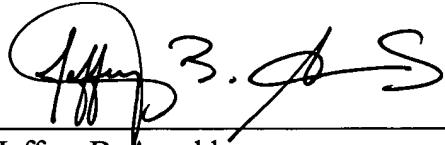
Filed: July 11, 2003

Page 2 of 2

The citation of this information does not constitute an admission that any of the materials are available as a reference or of priority, or a waiver of any right applicant may have under applicable statutes, Rules of Practice in patent cases, or otherwise.

Pursuant to 37 C.F.R. §1.97(b)(3) Applicants respectfully assert that no fee is due. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to deposit account no. 09-0528.

Respectfully submitted,



Jeffery B. Arnold
Reg. No. 39,540

February 3, 2006

Date

Womble Carlyle Sandridge & Rice, PLLC

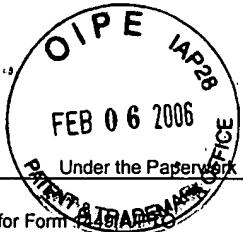
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Atlanta, GA 30357-0037

(404) 879-2433 (Telephone)

(404) 879-2933 (Facsimile)

Docket No.: H147 1020.2 (30727.0031.6)



FEB 06 2006

PTO/SB/08A (08-00)

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Substitute for Form 1040A

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet 1 of 1

Case: 1:19-cv-00147 Document: 1 Filed: 01/08/19 Page: 1 of 1

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature _____ **Date Considered** _____

¹Unique citation designation number. ²See attached Kinds of U.S. Patent Documents. ³Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴For Japanese patent document, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶Applicant is to place a check mark here if English language translation is attached.